

Commonwealth of Virginia

Department of Health

Bedding and Upholstered Furniture Inspection

P. O. Box 2448 - Room 232

Richmond, Va. 23218

Application for Virginia Bedding and Upholstered Furniture License

	Area Code and Phone			
		Area Code and Fax County		
		County		
If business or billing name and address information are different from shown,	please enter the correc	t information here:		
Business name	Billing name			
Street address	Street address			
City, State Zip+4	City, State Zip+4			
Name of Owner/Partners/Corporation Officers Address of Owner/Partner	ers/Corporation Officers		Title	
National Uniform Registry Number: Manufacturers, Importers, etc. must attactive by another state and attach a copy of the certificate issued by that sta		0 0 ,	·	
After the Virginia Registry Number has been assigned, it may be utilized as younger state.	our Uniform Registry N	umber if you do not posse	ss a Registry Number from	
Specific type of bedding and/or upholstered furniture manufactured. Use back if needed.				
Importer information. Name, city, and country of foreign manufacturers. Use back if needed.				
Type of License	License Fee			
Manufacturer of Bedding (see Notes 1 and 2)	\$100.00			
Manufacturer of Upholstered Furniture (see Notes 1 and 2)	\$100.00	Indicate license	Indicate licenses desired with an X in the applicable blocks and enter the total in the Total remitted block.	
Bedding Renovator	\$25.00			
Reupholsterer	\$25.00	i otal remitted t		
Supply Dealer	\$25.00			
Importer (see Notes 1 and 3)	\$100.00			
Total remitted				
affirm under the penalties of perjury that statements made in this applibelief are true and correct.	lication have been exa	mined by me and to the	best of my knowledge and	
Date Signatui	ire			
Return this application to the Virginia Department of Health with a check for the fire of		ease include two copies of	Contents Labels, if available.	

DH VIRGINIA
DEPARTMENT
OF HEALTH Protecting You and Your Environment www.vdh.state.va.us